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CONFIRMATION NO. 1016

SERIAL NUMBER 10/734,886	FILING DATE 12/15/2003 RULE	CLASS 239	GROUP ART UNIT 3752 *	ATTORNEY DOCKET NO. 4004041.0030					
APPLICANTS Bruce D. Lund, Chicago, IL; Michael Starrick, Maywood, IL; Krishnan Srirangam, Chicago, IL;									
** CONTINUING DATA ***** <i>Nine 2</i>									
** FOREIGN APPLICATIONS ***** <i>Nine 4</i>									
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 03/22/2004									
<table style="width: 100%; border: none;"> <tr> <td style="width: 40%; border: none;"> Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____ </td> <td style="width: 10%; border: none; text-align: center;"> STATE OR COUNTRY IL </td> <td style="width: 10%; border: none; text-align: center;"> SHEETS DRAWING 3 </td> <td style="width: 10%; border: none; text-align: center;"> TOTAL CLAIMS 8 </td> <td style="width: 10%; border: none; text-align: center;"> INDEPENDENT CLAIMS 1 </td> </tr> </table>					Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____	STATE OR COUNTRY IL	SHEETS DRAWING 3	TOTAL CLAIMS 8	INDEPENDENT CLAIMS 1
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ADDRESS 34758 JACK SHORE MUCH SHELIST FREED DENENBERG AMENT&RUBENSTEIN,PC 191 N. WACKER DRIVE SUITE 1800 CHICAGO , IL 60606-1615									
TITLE Pump operated spraying device									
FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td><input type="checkbox"/> All Fees</td> </tr> <tr> <td><input type="checkbox"/> 1.16 Fees (Filing)</td> </tr> <tr> <td><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)</td> </tr> </table>		<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees (Filing)	<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)		
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